

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

American Academy of Dermatology Association Political Action Committee (SkinPAC)

ADDRESS (number and street) ▼

1445 New York Avenue NW

Ste 800

☐ Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00359539

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☒ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

5. Covering Period 08 / 01 / 2016 through 08 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Steven Debnar

Signature of Treasurer

Steven Debnar

[Electronically Filed]

Date

09 / 15 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
08 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		157033.61
(b) Cash on Hand at Beginning of Reporting Period.....	232430.61	
(c) Total Receipts (from Line 19)	16716.84	588363.58
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	249147.45	745397.19
7. Total Disbursements (from Line 31)	2596.37	498846.11
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	246551.08	246551.08
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 08 01 2016

To:

 M M / D D / Y Y Y Y Y
 08 31 2016
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

14468.93

532051.19

(ii) Unitemized

2247.91

56312.39

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

16716.84

588363.58

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

16716.84

588363.58

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

16716.84

588363.58

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

16716.84

588363.58

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2096.37	13846.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2096.37	13846.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	467000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	18000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2596.37	498846.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2596.37	498846.11

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	16716.84	588363.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16716.84	588363.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	2096.37	13846.11
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	2096.37	13846.11

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Jill I. Allbritton

Mailing Address 7814 Blue Ribbon St

City
FultonState
MDZip Code
20759-2463FEC ID number of contributing
federal political committee.

C

Name of Employer

Anne Arundel Dermatology

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : 4FABAF89-734A-45A0-

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tricia R. Andrews

Mailing Address 7744 Deerwood Point Ct

City

Jacksonville

State

FL

Zip Code

32256-2825

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jacksonville Dermatology Assoc, PL

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : 43D8A1B0B5865CAAF995

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Megan Ann Brelsford

Mailing Address 1058 E Ocean View Ave

City

Norfolk

State

VA

Zip Code

23503-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Naval Medical Center Portsmouth

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 10 / 2016

Transaction ID : 466EAE493AD91D152A6E

Amount of Each Receipt this Period

41.67

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

583.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Carrine A. Burns

Mailing Address 91 Lower Flying Point Rd

City

State

Zip Code

Freeport

ME

04032-6305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Bates Mill Dermatology

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.02

Date of Receipt

08 / 04 / 2016

Transaction ID : 1FDF8C92246F0EE3F66

Amount of Each Receipt this Period

416.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Clay J. Cockerell

Mailing Address 4312 Arcady Ave

City

State

Zip Code

Dallas

TX

75205-3704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Cockerell Dermatopathology

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

08 / 04 / 2016

Transaction ID : 9FC0E3C021327BF3B5D

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Nicholas B. Countryman

Mailing Address 8103 Clearvista Pkwy
Ste 220

City

State

Zip Code

Indianapolis

IN

46256-4697

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Dawes Fretzin Dermatology Group

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 02 / 2016

Transaction ID : 69A01C33-16CA-4DC6-

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1416.67

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 8 OF 20

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Sunil Sharan Dhawan

Mailing Address 119 Martingale Dr

City	State	Zip Code
Fremont	CA	94539-6313

FEC ID number of contributing federal political committee.

C

Name of Employer

Center for Dermatology

Occupation

Physician

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

458.34

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08		29		2016

Transaction ID : 4378B2447D1A05086B79

Amount of Each Receipt this Period

41.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Rebecca Lee Euwer

 Mailing Address 9 Medical Pkwy
 Plaza 4, Suite 105

City	State	Zip Code
Dallas	TX	75234

FEC ID number of contributing federal political committee.

C

Name of Employer

Self Employed

Occupation

Dermatologist

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08		04		2016

Transaction ID : 3AA86B296150A2A5B65

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Nicholas J. Golda

Mailing Address 1202 E Pierpont Meadows Rd

City	State	Zip Code
Columbia	MO	65201-9308

FEC ID number of contributing federal political committee.

C

Name of Employer

Univ of Missouri Medical Center

Occupation

Dermatologist

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08		14		2016

Transaction ID : 44BD9E3453D454273551

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

591.67

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 20
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Howard S. GoldbergMailing Address 9 Goodwins Ct
Apt 6

City	State	Zip Code
Marblehead	MA	01945-3583

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Physician-Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.50

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	24	/	2016

Transaction ID : 4385B0A61EE8E0F270C4

Amount of Each Receipt this Period

93.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael Shane Hamman

Mailing Address 1212 Beryl St

City	State	Zip Code
San Diego	CA	92109-2048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Yuma Dermatology

Dermatology Resident

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	01	/	2016

Transaction ID : F8B45CE6-9C24-4E38-

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lynne Marie Haven

Mailing Address 11 Sherwood Farm Ln

City	State	Zip Code
Greenwich	CT	06831-4410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Greenwich Medical Building

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	19	/	2016

Transaction ID : 1F6122D0-16F3-47AD-

Amount of Each Receipt this Period

200.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

793.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Yolanda Rosi Helfrich

Mailing Address 3100 Pittsview Dr

City

Ann Arbor

State

MI

Zip Code

48108-2902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Michigan

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 04 / 2016

Transaction ID : 6F86F6CC3D9BB5DCDEE

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lance B. Henry

Mailing Address 1596 Steele Rd

City

Springdale

State

AR

Zip Code

72762-6305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Dermatology & Skin Cancer Cen

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

08 / 04 / 2016

Transaction ID : BF5F451113394776847

Amount of Each Receipt this Period

1250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Hazle Smith Konerding

Mailing Address 205 Cyril Ln

City

Richmond

State

VA

Zip Code

23229-7740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Commonwealth Dermatology PC

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

08 / 04 / 2016

Transaction ID : 52DB2DB7846977CDD9F

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1875.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Carrie L. Kovarik

Mailing Address 3600 Spruce St

Dept of

City

Philadelphia

State

PA

Zip Code

19104-4211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Pennsylvania

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 26 / 2016

Transaction ID : 86CAE08E-0448-4E9E-

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Shauna Kay Kranendonk

Mailing Address 18764 Rio Vista Dr

City

Jupiter

State

FL

Zip Code

33469-2015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sky Center for Dermatology

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 18 / 2016

Transaction ID : 06713492117490ACED2

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Dominic Lee

Mailing Address 23436 Sanabria Loop

City

Bonita Springs

State

FL

Zip Code

34135-5380

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 01 / 2016

Transaction ID : EC878F52-7FF3-4A02-

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Alvin Henry Meyer JR.

Mailing Address 1100 Stonewall Jackson Court

City

Nashville

State

TN

Zip Code

37220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 18 / 2016

Transaction ID : A57B244DA72F9D84F34

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Angela Yen Moore

Mailing Address 711 E Lamar Blvd
Ste 200

City

Arlington

State

TX

Zip Code

76011-3800

FEC ID number of contributing
federal political committee.

C

Name of Employer

Arlington Center for Dermatology

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 24 / 2016

Transaction ID : 98E8A519-FA9E-48F8-

Amount of Each Receipt this Period

249.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Craig Williams Nangle

Mailing Address 431 Overlook Trl

City

Nixa

State

MO

Zip Code

65714-7201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ozarks Dermatology Specialists

Occupation

Dermatologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

08 / 04 / 2016

Transaction ID : 6052209D5BBD7631BF2

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3249.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 20

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Gopal A. PatelMailing Address 1088 W Baltimore Pike
Ste 2506City State Zip Code
Media PA 19063-5166FEC ID number of contributing
federal political committee.

C

Name of Employer

Aesthetic Derm Associates

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2016

Transaction ID : A3661678-DD53-4D72-

Amount of Each Receipt this Period

252.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Darrell S. RigelMailing Address 300 E 85th St
Apt 1604City State Zip Code
New York NY 10028-4594FEC ID number of contributing
federal political committee.

C

Name of Employer

Rigel Dermatology Group

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2016

Transaction ID : BFE66EDE046234D2ADD

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Louis Saco

Mailing Address 12003 Brightwater Blvd

City State Zip Code
Temple Terrace FL 33617-1704FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ South Florida College of Medicine

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2016

Transaction ID : 44A3BB744544D08F13C4

Amount of Each Receipt this Period

21.67

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1273.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Kimberly R. Schoofs

Mailing Address 5810 NW Barry Rd
Ste 100

City State Zip Code
Kansas City MO 64154-1400

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kansas City Skin & Cancer Center

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : F4A04657-9E16-4459-

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Steven Schuckit

Mailing Address 13800 W North Ave
Ste 100

City State Zip Code
Brookfield WI 53005-4977

FEC ID number of contributing
federal political committee.

C

Name of Employer
Affiliated Dermatologists

Occupation
Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : 376E20BD-7DAC-4CE4-

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Daniel M. Siegel

Mailing Address 33 Hitherbrook Rd

City State Zip Code
Saint James NY 11780-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Long Island Skin Cancer And Dermatolog

Occupation
Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : 758733B00724BFAFA49

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Daniel Peterson Skinner

Mailing Address 2250 W Southern Ave
Ste 101

City Mesa State AZ Zip Code 85202-4736

FEC ID number of contributing federal political committee.

C

Name of Employer

Skin Cancer Specialists

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 31 / 2016

Transaction ID : E8454C38-F6D9-4474-

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sarah G. Smith

Mailing Address 625 E Main St

City Lexington State KY Zip Code 40508-2311

FEC ID number of contributing federal political committee.

C

Name of Employer

Skin MD, PLLC

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 26 / 2016

Transaction ID : 6D0F6A8F-988D-4188-

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Toni C. Stockton

Mailing Address 1602 E Saltsage Dr

City Phoenix State AZ Zip Code 85048-9419

FEC ID number of contributing federal political committee.

C

Name of Employer

Stockton Dermatology

Occupation

Dermatologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 25 / 2016

Transaction ID : 656B02D43FBE3393467

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Sabra Sullivan

Mailing Address 242 Hidden Oaks Dr

City

Ridgeland

State

MS

Zip Code

39157-7000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dermatology Associates, LLC

Occupation

Physician

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2166.64

Date of Receipt

08 / 04 / 2016

Transaction ID : 915CFDA96224855CC4C

Amount of Each Receipt this Period

208.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. George R. Woodbury JR.

Mailing Address 2118 Kirby Rd

City

Memphis

State

TN

Zip Code

38119-5510

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rheumatology Dermatology Associates

Occupation

Physician

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 31 / 2016

Transaction ID : 475730D232FB28D4F54

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. David T. Woodley

Mailing Address 2069 Midlothian Dr

City

Altadena

State

CA

Zip Code

91001-3411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Southern California

Occupation

Dermatologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 04 / 2016

Transaction ID : 573B63BABAB9CF0152F

Amount of Each Receipt this Period

127.50

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

585.83

14468.93

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072

Purpose of Disbursement
Amex Fees

001

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : V5B089610FC2EE7B4853

Amount of Each Disbursement this Period

417.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address PO Box 6603

City	State	Zip Code
Hagerstown	MD	21741

Purpose of Disbursement
VS/MC Fees

001

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Transaction ID : VC6AF78A4956971F0292

Amount of Each Disbursement this Period

1679.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2096.37

2096.37

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Cathy McMorris Rodgers for Congress

Mailing Address Box 137

City	State	Zip Code
Spokane	WA	99210-0137

Purpose of Disbursement
Void of 2016 Primary Check

Candidate Name

Cathy McMorris Rodgers

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: WA	District: 05	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2016

Transaction ID : 990FB9FFC3977A063CB

Amount of Each Disbursement this Period

-2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Fightin' Ninth Political Action Committee

Mailing Address PO Box 71596

City	State	Zip Code
Richmond	VA	23255-1596

Purpose of Disbursement
2016 Contribution

Candidate Name

Fightin' Ninth Political Action Committee

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
State:	District:	Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2016

Transaction ID : 4AA5462453983932B98

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Huffman for Congress 2014

Mailing Address PO Box 151563

City	State	Zip Code
San Rafael	CA	94915

Purpose of Disbursement
Void of 2016 Primary Check

Candidate Name

Jared William Huffman

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: CA	District: 02	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2016

Transaction ID : EF698555A1162974F62

Amount of Each Disbursement this Period

-1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-1000.00

--

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

American Academy of Dermatology Association Political Action Committee (SkinPAC)

 Memo Item

Memo Item

Memo Item

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Price for Congress

Mailing Address PO Box 425

City	State	Zip Code
Roswell	GA	30077

Purpose of Disbursement
2016 General

011

Candidate Name

Thomas E. Price M.D.

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: GA District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		10		2016

Transaction ID : 17EBD5A521EA525A585

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

--

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
-----	---	-----	---	-------------

Amount of Each Disbursement this Period

--

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

--

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
-----	---	-----	---	-------------

Amount of Each Disbursement this Period

--

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1500.00

500.00